## United States of America

## Department of Transportation—Federal Aviation Administration

## Supplemental Type Certificate

Number SA4290SW

This certificate, issued to Falcon Jet Corporation P.O. Box 967

Little Rock, Arkansas 72203

certifies that the change in the type design for the following product with the limitations and conditions

therefor as specified hereon meets the airworthiness requirements of Part 25 of the Federal Aviation

Regulations.

Original Product - Type Certificate Number: A46H1

Make: Dassault-Brequet

. Model:

Mystere - Falcon 50

Description of Type Design Change:

Installation of Sperry VA-100 Voice Advisory System in accordance with Drawing List Report No. F50-01031, Revision H dated 11/15/84, or later FAA approved revision.

Limitations and Conditions:

FAA Approved Airplane Flight Manual Supplement Report No. 35159 dated 4/1/81; or Revision C dated 2/16/84 or Revision D dated 1/11/85, or Revision E dated 12/18/85, is required.

Compatibility of this modification with other previously approved modifications must be determined by the installer.

This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked, or a termination date is otherwise established by the Administrator of the Gederal Aviation Administration.

Date of application: August 8, 1979

Date reissued :

Date of issuance :

April 10, 1981

Date amended :

12/28/81; 3/7/84; 4/30/84; 1/11/85; 12/18/85 Revision 5

By direction of the Administrator

L. B. Andriesen (Signature)

Manager, Aircraft Certification Division

Southwest Region

(Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

the transfer of this Supplemental Type Cer	nent below may be used to notify the appropriate FAA Regional Office of tificate.
The FAA will reissue the certificate in the name of the transferee and forward it to him.	
TRANSFER ENDORSEMENT	
Transfer the ownership of Suppleme	ntal Type Certificate Number
to (Name of transferee)	
(Address of transferee)	(Number and street)
	(City, State, and ZIP code)
from (Name of grantor) (Print or type)	
	•
(Address of grantor)	(Number and street)
	(City, State, and ZIP code)
Extent of Authority (if licensing agr	reement):
Date of Transfer:	
Date of Transier.	

Signature of grantor (In ink):